

Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 290.00

Complete if Known

Application Number 10/078743
Filing Date February 19, 2002
First Named Inventor Douglas U. Mennie
Examiner Name Not Yet Assigned
Art Unit N/A
Attorney Docket No. 47171-00300US

RECEIVED

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number

10-0447

Deposit Account Name

Jenkins & Gilchrist, a
Professional Corporation

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims ** = x =
Independent Claims ** = x =
Multiple Dependent =

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	88	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	88	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110.00
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 290.00

SUBMITTED BY

Name (Print/Type) Mark Anderson

Registration No. (Attorney/Agent)

54,656

Telephone (312) 425-8547

Signature

Mark Anderson

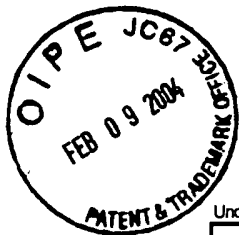
Date February 6, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 6, 2004

Signature:

Maureen K. Hammonds (Maureen K. Hammonds)



3653

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

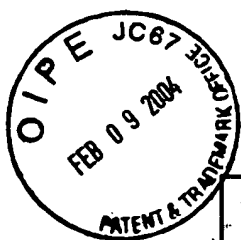
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/078743	
	Filing Date	February 19, 2002	
	First Named Inventor	Douglas U. Mennie	
	Art Unit	3653	
	Examiner Name	Kenneth W. Bower	
Total Number of Pages in This Submission	1	Attorney Docket Number	47171-00300USC2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37. CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>RECEIVED FEB 12 2004 GROUP 3600</div>		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION Mark Anderson
Signature	
Date	February 6, 2004

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Dated: February 6, 2004	Signature: (Maureen K. Hammonds)



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Filing Date February 19, 2002
First Named Inventor Douglas U. Mennie
Examiner Name Not Yet Assigned
Art Unit N/A
Attorney Docket No. 47171-00300US2

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☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number 10-0447

Deposit Account Name Jenkens & Gilchrist, a Professional Corporation

The Director is authorized to: (check all that apply)

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1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 290.00

SUBMITTED BY

(Complete if applicable)

Name (Print/Type) Mark Anderson Registration No. (Attorney/Agent) 54,656 Telephone (312) 425-8547
Signature [Signature] Date February 6, 2004

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Dated: February 6, 2004

Signature: [Signature] (Maureen K. Hammonds)

AMENDMENT TRANSMITTAL LETTER

ATTORNEY'S DOCKET NO.:

47171-00300USC2

SERIAL NUMBER:

10/078,743

FILING DATE:

February 19, 2002

EXAMINER:

Kenneth W. Bower

GROUP ART UNIT:

3653

INVENTION: METHOD AND APPARATUS FOR DISCRIMINATING AND COUNTING DOCUMENTS

FEB 12 2004

INVENTOR(S): DOUGLAS U. MENNIE

GROUP 3600

TO THE ASSISTANT COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) NO. OF EXTRA CLAIMS PRESENT	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	122	MINUS	45	77	X 18	\$1,386.00
INDEP. CLAIMS	42	MINUS	14	28	X 86	\$2,236.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$3,622.00

* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☒ A check in the amount of \$3,622.00 is enclosed.☐ Charge \$ _____ to Deposit Account No. 10-0447 (47171-00300USC2) . A triplicate
_____ No. _____

copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required at any time during the prosecution (except for payment of the Issue Fee) of this application without specific authorization, or credit any overpayment to Deposit Account No. 10-0447 (Order No. 47171-00300USC2).☐ The undersigned petitions for any extension of time for filing this document required under 37 C.F.R. 1.136 and a check in the amount of \$ _____ is enclosed.

February 6, 2004

Date

JENKENS & GILCHRIST

225 West Washington Street, #2600
Chicago, Illinois 60606
312.425.3900
Signature

Mark R. Anderson,

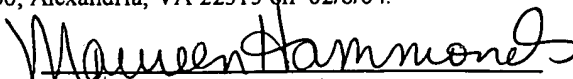
Registration No. 54,656

Attorney, Reg. Number

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February 6, 2004

(Date)


(Signature)

Maureen Hammonds

(Printed)